# <u>L24000182112</u>

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



000425675780

RECEIVED

WAPR 22 PM 2: 4

## Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# incserv

### **ORDER FORM**

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 4/22/2024

**PRIORITY** Regular Approval

**OUR REF # (Order ID#)** 1250142

**ORDER ENTITY** 

TDJ PROPERTIES, LLC

#### PLEASE PERFORM THE FOLLOWING SERVICES:

TDJ PROPERTIES, LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 Authorized

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, April 22, 2024 Page Laf I

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name	1 - Name: of the Limited Liability Company is:		
	TDJ Properties, LLC (Must contain the words "Limited Liability C	Company, "L.L.C.," or "LLC.")	
ARTICLE The mailin	: II - Address: g address and street address of the principal office of th	e Limited Liability Company is:	
	Principal Office Address:	Malling Addre	<u>ess</u> :
2436 N. Federal Hwy #181		2436 N. Foderal Hwy #181	
	Lighthouse Point, FL 33064	Lighthouse Point, FL 33064	
	and the Florida street address of the registered agent are		
	Mansfield, Bronstein, & S Name	tone, LLP	
	<i>,</i>		
	200 E Broward Blvd, Suite		
	Florida street address (P.O. B		
	Fort Lauderdale F		
	City Sta	te Zip	
place design	n named as registered agent and to accept service of pronated in this certificate, I hereby accept the appointment to comply with the provisions of all statutes relating to with and accept the obligations of my position as registed.  By:  Registered Age	as registerea agent and agree to act the proper and complete performan	ce of my duties, and l
			-1 • •
	(CON	MNUED)	• • • • • • • • • • • • • • • • • • • •
			1

## ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	Steadfast 2022 Trust 2436 N. Federal Hwy #181 Lighthouse Point, FL 33064		
(Use attachment if necessary)			
If an effective date is listed, the date must be sp he date of filing.) Note: If the date inserted in this block does not	e of filing: (OPTIONAL)  pecific and cannot be more than five business days prior to  meet the applicable statutory filing requirements, this date w	or 90 days a	
he document's effective date on the Department	of State's records.		
RTICLE VI: Other provisions, if any.		<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	. Э	
		:	٠.
REOUIRED SIGNATURE.	hanhe	;	
Signature of a m This document is execut I am aware that any fals	ember or an authorized representative of a member.  sted in accordance with section 605.0203 (1) (b), Florida State information submitted in a document to the Department of the felony as provided for in s.817.155, F.S.		· .

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (2013)

\$ 5.00 Certificate of Status (Optional)